

RECEIVED
CENTRAL FAX CENTER

MAY 20 2004

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

OFFICIAL

In re the application of : Date: May 20, 2004
Becker et al. : Group Art Unit: 2178
Serial No.: 09/507,484 : Examiner: Matthew J. Ludwig
Filed: 02/10/2000 :
For: INTERNET WEB BROWSER WITH MEMORY ENHANCED HYPERLINK DISPLAY

CERTIFICATE OF TRANSMISSION

To: Examiner Ludwig:

I hereby certify that the attached correspondence identified
below is being facsimile transmitted to the Patent and Trademark
Office at 703-872-9306:

1. Amendment Transmittal Form (1 page)
2. Non-Fee Amendment (16 pages)
2. Terminal Disclaimer (2 pages)

on May 20, 2004

Frances Diaz / Frances Diaz
Signature

TUC919990063US1

S/N 09/507,484

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

09507484

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS		
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	27 minus 20 = *	7
INDEPENDENT CLAIMS	3 minus 3 = *	
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

12-1-03

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	* 27	Minus ** 27	=
Independent	* 3	Minus *** 3	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

5-20-04

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	* 25	Minus ** 27	=
Independent	* 7	Minus *** 3	= 4
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus **	=
Independent	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

RATE	FEE
BASIC FEE	385.00
XS 9=	
X43=	
+145=	
TOTAL	

RATE	FEE
BASIC FEE	770.00
XS18=	126
X86=	
+290=	
TOTAL	816

SMALL ENTITY

OR OTHER THAN SMALL ENTITY

RATE	ADDI-TIONAL FEE
XS 9=	
X43=	
+145=	
TOTAL ADDIT. FEE	

RATE	ADDI-TIONAL FEE
XS18=	
X86=	
+290=	
TOTAL ADDIT. FEE	

RATE	ADDI-TIONAL FEE
XS 9=	
X43=	
+145=	
TOTAL ADDIT. FEE	

RATE	ADDI-TIONAL FEE
XS18=	
X86=	344
+290=	
TOTAL ADDIT. FEE	344

RATE	ADDI-TIONAL FEE
XS 9=	
X43=	
+145=	
TOTAL ADDIT. FEE	

RATE	ADDI-TIONAL FEE
XS18=	
X86=	
+290=	
TOTAL ADDIT. FEE	